Teri Ambs

From:

Cathleen Sue Graham <catsgraham@gmail.com>

Sent:

Tuesday, March 11, 2014 7:14 AM

To:

Teri Ambs

Cc: Subject: Colleen S. Curtis; Cate McClure I must miss today's hearing

Attachments:

HB4271 Fails - Testimony to Senate Committee from CGrahamRN.pdf; Patient Safety

Report Card.HB4271 - MI 2014.pdf

Good morning Teri!

I had hoped to be able to attend the meeting today of the Senate Committee on Government Operations. However, I am a hospice nurse and my schedule is one I don't always have control over. There are critical patients that need my assistance, so I must miss today's hearing.

Could you please help by getting a copy of the testimony I wanted to deliver concerning HB 4271 to each member of the Committee? Please note there are two parts - one is a 2-page .pdf document and the other is a one-page Excel spreadsheet saved as a pdf.

Thanks so much for your assistance!

Cathleen Graham RN CHPN

TESTIMONY TO THE

Michigan Senate Committee on Government Operations

Report Card for HB 4271:

Well-intended - but fails to protect Michigan patients

Ву

Cathleen Graham, RN, CHPN (Certified Hospice and Palliative Nurse)

March 11, 2014

Good afternoon. I am Cathleen Graham and I am a Certified Hospice and Palliative Care Registered Nurse. For the past 5 years, I have worked for one of the largest hospice programs in the nation caring for patients in the western part of our state – from Grand Rapids to Traverse City.

When cure is no longer possible, hospice offers services focused on pain relief, comfort and enhancing quality-of-life. I have been directly involved with the care of dozens of Michigan patients whose end-of-life journey was significantly helped by medical marihuana.

From my personal experience with patients facing their final days, I have seen medical marihuana accomplish many things, including:

- control nausea of a patient undergoing chemotherapy
- stimulate appetite in a patient facing malnutrition
- ease muscle spasms
- decrease pain
- improve ability to sleep

I have followed with great interest Rep. Mike Callton's bill, HB 4271, that creates a local-option, medical marihuana "provisioning system." I testified in favor of it twice when the bill was being considered by the House. I believed the passage of this bill would mean thousands of Michigan residents at the end-of-life would finally be able to acquire a medicine their doctor and hospice team recommends. At the same time, I found it necessary to point out serious flaws that needed to be corrected.

Last year I urged the House Judiciary Committee to add amendments that would assist patients and medical professionals. I believe that lawful marihuana users should have the same kind of confidence in knowing what is in their product as they do with other medications and herbal remedies.

The major problem health care providers have in working with patients who choose to use marihuana is the lack of basic label information required for all other medications (prescription, non-prescription and botanical).

This bill ignores the basic right to information patients deserve. Accurate, useful labels with independently verified information are needed to help guide both medical teams and patients in making informed choices. It is necessary for a precise dosage of medical marihuana to be prescribed, like with all other medications.

Can you imagine a patient being told by a doctor to take "pain medication" without specifics like what kind, how much, or how often?

One of the basics of modern health care is medical information. How can we document in a patient's chart what they took if there are no labels detailing what kind of medicine or strength it is?

The "Hippocratic Oath" is an oath historically taken by physicians and other healthcare professionals swearing to practice medicine honestly and includes the principle "first, do no harm." How can we follow that with a "medicine" that is not tested for purity, not labeled with its documented contents, and not required to be processed and packaged to even meet government standards for producing animal feed?

HB 4271, as it was introduced, provided very few of these protections for patients. While the public arguments on behalf of this bill now talk about testing and safety, I am saddened to find that very few substantive improvements have been made.

I never expected all of my suggestions would be added – but of the 13 specific recommendations in my testimony – $\underline{\text{none}}$ are included in the version of Rep. Callton's bill that passed the House.

With the assistance of the Cannabis Standards Institute, I put together the "**Report Card**" you will find attached to this written testimony. We wanted to see how this bill addresses the issues medical professionals feel are important. It includes a comparison with legislation and regulations adopted last year in other states.

I think you will find this simple, one-page report thought-provoking – personally, I found it awfully disappointing. EVERY OTHER STATE that passed new regulations did far more to protect their residents than the bill you have before this committee today.

HB 4271 not only fails - its grade is a low F.

I urge you to stop – <u>do not report this bill</u> -- until the needs of patients are addressed.

Patient Safety Report Card for HB 4271 (as passed House 12/12/13)

Patient Safety Requirement	1125,425,71	Colo	Wash	Conn	Mass	Nev
Compliance with requirements for similar Michigan products that do not contain marihuana		>	>	>	>	\ \
Each harvest batch must be sampled and tested		>	>	>	>	>
Harvests are held in quarantine until the lab results reported		Д.	*	>		>
Label must provide batch number or bar code to facilitate recalls & traceability	Ь	À	1	>	>	>
Label must provide date of dispensing		<i>></i>		>	>	>
Label must provide date when marijuana product was made		>	<i>></i>	>	>	
Label must provide name and/or license number of cultivation facility where cannabis was grown		A	<i>^</i>	^	1	
Label must provide name and/or license number of facility where product produced		<i>^</i>	٨	>	_	
Label must provide net weight		<i>></i>	>	>	>	>
Label must provide product expiration date		<i>></i>		>	>	
Label must state quantity of cannabidiol (CBD)		A	À	>		>
Label must state quantity of cannabidiol acid (CBDA)		A		^		-
Label must state quantity of delta 9-tetrahydrocannabinol (THC)		A	<u> </u>	>	>	>
Label must state quantity of delta 9-tetrahydrocannabinol acid (THCA)		A	<i>^</i>	~		
Label must provide retail center name, license number, address & phone		A	<i>^</i>	*	1	>
Label must list all fungicides, herbicides & growth hormones used during cultivation		<i>^</i>	<i>^</i>	N/A	N/A	
Label must list of solvents and chemicals used in the creation of a concentrate		1	<i>^</i>			^
Label shall be printed on or securely attached to any package containing marihuana		^	1		1	,
Label shall be printed on or securely attached to any package containing marihuana products		>	*	/	~	,
Label provides warning that product contains marijuana		. 🖈	1	1	^	^
Medical Marihuana must be dispensed in child-resistant container		,		1	\	
Medical Marihuana must be sold in sealed, tamper-evident container		^	<i>^</i>	^	^	`
Medical Marihuana infused products must be dispensed in child-resistant container		1	À	1	×	
Medical Marihuana infused products must be sold in sealed, tamper-evident container		ļ	<i>^</i>	<i>></i>	^	>
Label to include name of patient like other prescriptions		·		`		
Packaging, labeling & testing requirements for wholesale sales		a.	^	^	~	>
Must be labeled with Pass/Fail rating based on a chemical residue analysis	Ъ	A	1	1	^	1
Must be labeled with Pass/Fail rating based on a microbiological analysis	Ъ	У	<i>^</i>	^	^	`
Processed, packaged & labeled according to FDA regs for nutritional supplements				`	~	
Shall not be labeled "organic" unless certified following Michigan Organic Products rules			<i>,</i>	^	~	^
Testing required to be completed immediately prior to final packaging			. ,	_ /		^
Testing required to be conducted by an independent, third-party laboratory	Р	٨	^	`	,	>
Testing lab must be accredited pursuant to ISO/IEC 17025:2005					>	Ъ